

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO. 10721032
APPLICANT(S)

FLIND DATE
4-24-03

CLAIMS						
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		
NO	DEP	NO	DEP	NO	DEP	
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21	1					
22		1				
23			1			
24				1		
25					1	
26						1
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45						
46						
47						
48						
49						
50						
TOTAL NO.	4					
TOTAL DEP.	16					
TOTAL CLAIMS	20					

CLAIMS						
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		
NO	DEP	NO	DEP	NO	DEP	
51						
52						
53						
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100						
TOTAL NO.						